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10/31/2005

**QUARLES & BRADY LLP** 411 E. WISCONSIN AVENUE **SUITE 2040** MILWAUKEE, WI 53202-4497

12/14/2005 TBESHAH2 00000002 170055 09664519

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(Signature)
(Date)

	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	09/664,519	09/18/2000	Michael C. Barney	660005.98757	4670

TITLE OF INVENTION: USE OF HOP ACIDS TO INHIBIT GROWTH OF STAPHYLOCOCCUS AUREUS AND PREVENT TOXIC SHOCK SYNDROME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION	FEE TOTAL FEE(S) DU	JE DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	01/31/2006
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KAM, C	HIH MIN	1656	424-178100	)	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON T			For printing on the patent fro ) the names of up to 3 regist agents OR, alternatively, ) the name of a single firm (ligistered attorney or agent) ar registered patent attorneys or ted, no name will be printed.	ered patent attorneys  1 QU  aving as a member a  d the names of up to	arles & Brady LLF
			• • •	an assignee is identified belowent.	w, the document has been filed for
(A) NAME OF ASSIGN Miller B	EE rewing Compa	` '	SIDENCE: (CITY and STAT Milwaukee, W.	•	
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Advance Order - # or	Copies	<u>Q</u> 7	The Director is hereby authoosit Account Number 17	rized by charge the required fee 0055 (enclose an	e(s), or credit any overpayment, to extra copy of this form).
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Authorized Signature	Killend to	Rell	D	ate_ December 5,	2005
	Richard T.			egistration No. 33,599	
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